

**The information below outlines 1996 amendments to the airman medical standards of the Federal Aviation Regulations. The new rules are effective September 16, 1996. The 1996 rule change also amends the duration period of the third-class airman medical certificate-- as of September 16, when an airman medical certificate is issued to an applicant who is under age 40, it will be good for a 3 year period. For a full discussion of the notice of proposed rulemaking and final rule, see the *Federal Register* at 59 FR 53226 and 61 FR 11238.**

### **SUMMARY OF AMENDMENTS TO PART 67, MEDICAL STANDARDS AND CERTIFICATION**

The following is a summary of the substantive revisions made by this rulemaking. Because this rulemaking completely recodifies part 67, this summary states both the current and new section/paragraph numbers.

1. Distant visual acuity requirements for first- and second-class medical certification are changed to delete the uncorrected acuity standards. However, each eye must be corrected to 20/20 or better, as in the current standard. [Current Secs. 67.13(b) and 67.15(b); Final Secs. 67.103(a) and 67.203(a)]
2. For third-class medical certification, the current 20/50, uncorrected, or 20/30, corrected, distant visual acuity standard is changed to 20/40 or better, in each eye, with or without correction. [Current Sec. 67.17(b); Final Sec. 67.303(a)]
3. For first- and second-class medical certification, minimum near visual acuity requirements are specified in terms of Snellen equivalent (20/40), corrected or uncorrected, each eye, at 16 inches. This replaces the current standard of  $v=1.00$  at 18 inches for first-class only. An intermediate visual acuity standard (near vision at 32 inches) of 20/40 or better at 32 inches Snellen equivalent, corrected or uncorrected, is added to the first- and second-class visual requirements for persons over age 50. [Current Secs. 67.13(b) and 67.15(b); Final Secs. 67.103(b), 67.203(b), and 67.303(b)]
4. A near visual acuity standard of 20/40 or better, Snellen equivalent, at 16 inches in each eye separately, with or without correction is added to the third-class visual requirements. [Current (None); Final Sec. 67.303(b)]
5. Color vision requirements are amended to read: "ability to perceive those colors necessary for safe performance of airman duties," and are the same for all classes. Current standards require "normal color vision" for first-class and the ability to distinguish aviation signal colors for second- and third-class applicants. [Current Secs. 67.13(b), 67.15(b), and 67.17(b); Final Secs. 67.103(c), 67.203(c), and 67.303(c)]
6. The current first-class standard pertaining to pathological conditions of the eye or adnexa that interfere or that may reasonably be expected to interfere with proper function of an eye is substituted in both the second- and third-class standards for the current standards which specify,

respectively, "no pathology of the eye" and "no serious pathology of the eye." [Current Secs. 67.15(b) and 67.17(b); Final Secs. 67.203(e) and 67.303(d)]

7. The "whispered voice test" for hearing is replaced for all classes by a conversational voice test using both ears at 6 feet; an audiometric word (speech) discrimination test to a score of at least 70 percent obtained in one ear or in a sound field environment; or pure tone audiometry according to a table of acceptable thresholds (American National Standards Institute (ANSI), 1969). [Current Secs. 67.13(c), 67.15(c), and 67.17(c); Final Secs. 67.105(a), 67.205(a), and 67.305(a)]

8. The standards pertaining to the ear, nose, mouth, pharynx, and larynx are revised to more general terms and related to flying and speech communication. Specific references to the mastoid and eardrum are deleted. The current standard, "No disturbance in equilibrium," is changed to, "No ear disease or condition manifested by, or that may reasonably be expected to be manifested by, vertigo or a disturbance of equilibrium." The amended standards are the same for all classes. [Current Secs. 67.13(c), 67.15(c), and 67.17(c); Final Secs. 67.105(b), 67.205(b), and 67.305(b)]

9. "Psychosis," as used in the final rule, refers to a mental disorder in which the individual has delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition, or may reasonably be expected to manifest such symptoms. [Current Secs. 67.13(d), 67.15(d), and 67.17(d); Final Secs. 67.107(a), 67.207(a), and 67.307(a)]

10. Substance dependence and substance abuse are defined and specified as disqualifying medical conditions. Substance dependence is disqualifying unless there is clinical evidence, satisfactory to the Federal Air Surgeon, of recovery, including sustained total abstinence from the substance for not less than the preceding 2 years. Substance abuse within the previous 2 years is disqualifying. It is defined as use of a substance in a situation in which that use is physically hazardous if there has been at any other time an instance of the use of a substance also in a situation in which that use was physically hazardous; or if a person has received a verified positive drug test result under an anti-drug program of the Department of Transportation or one of its administrations; or if the Federal Air Surgeon makes a finding of substance abuse. Alcohol dependence and alcohol abuse are included in the terms "substance dependence" and "substance abuse", respectively. [Current Secs. 67.13(d), 67.15(d), and 67.17(d); Final Secs. 67.107(a) and (b), 67.207(a) and (b), and 67.307(a) and (b)]

11. "Bipolar disorder" is added as a specifically disqualifying condition. This addresses an issue created by a change in nomenclature contained in the Diagnostic and Statistical Manual of Mental Disorders, Third Edition (DSM III), and continued in the DSM IV. [Current (None); Final Secs. 67.107(a), 67.207(a), and 67.307(a)]

12. The general mental standard is amended to add the word "other" before "mental." The final revised standard reads, "No other personality disorder, neurosis, or other mental condition \* \* \*." [Current Secs. 67.13(d), 67.15(d), and 67.17(d); Final Secs. 67.107(c), 67.207(c), and 67.307(c)]

13. "A transient loss of control of nervous system function(s) without satisfactory medical explanation of the cause," is added as a specifically disqualifying neurologic condition. [Current (None); Final Secs. 67.109(a), 67.209(a), and 67.309(a)]

14. The word "seizure," is substituted for "convulsive." [Current Secs. 67.13(d), 67.15(d), and 67.17(d); Final Secs. 67.109(b), 67.209(b), and 67.309(b)]

15. "Cardiac valve replacement," "permanent cardiac pacemaker implantation," and "heart replacement" are added as specifically disqualifying cardiovascular conditions for all classes of certification. [Current Secs. 67.13(e), 67.15(e), and 67.17(e); Final Secs. 67.111(a); 67.211 (d), (e), and (f); and 67.311 (d), (e), and (f)]

16. The time period for which an electrocardiogram may be used to satisfy the requirements of the first-class medical certificate is revised to 60 days from the current 90 days. [Current Sec. 67.13(e); Final Secs. 67.111(c)]

17. The current table of age-related maximum blood pressure readings for applicants for first-class medical certificates and the reference to "circulatory efficiency" are deleted. Blood pressure will continue to be assessed for all three classes but will be evaluated under the appropriate general medical standards. [Current Sec. 67.13(e); Final Secs. 67.113(b), 67.213(b), and 67.313(b)]

18. Current Sec. 67.19, Special issue of medical certificates, is rewritten [Final Sec. 67.401(a)] to provide for, at the discretion of the Federal Air Surgeon, an "Authorization for a Special Issuance of Medical Certificate" (Authorization), valid for a specified period of time. An individual who does not meet the published standards of part 67 may be issued a medical certificate of the appropriate class if he or she possesses a valid Authorization. The duration of any medical certificate issued in accordance with Sec. 67.401 is for the period specified at the time of its issuance or until withdrawal of an Authorization upon which the certificate is based. A new Authorization is required after expiration, and the applicant must again request Authorization.

19. Final Sec. 67.401(b) provides for a Statement of Demonstrated Ability (SODA) instead of an Authorization. A SODA will be issued without expiration date to applicants whose disqualifying conditions are static or nonprogressive and who have been found capable of performing airman duties without endangering public safety. A SODA authorizes an aviation medical examiner to issue a medical certificate if the condition is unchanged and the applicant is otherwise eligible.

20. Final Sec. 67.401(e) retains the language of current Sec. 67.19(c) regarding consideration of the freedom of a private pilot to accept reasonable risks to his or her own person or property that are not acceptable in the exercise of commercial or airline transport pilot privileges, and consideration at the same time of the need to protect the safety of persons and property in other aircraft and on the ground.

21. Final Sec. 67.401(f) adds language that explicitly provides that the Federal Air Surgeon may withdraw the Authorization or SODA. An Authorization or SODA may be withdrawn at any time for (1) adverse change in medical condition, (2) failure to comply with its provisions, (3) potential endangerment of public safety, (4) failure to provide medical information, or (5) the making or causing to be made of a statement that is covered by Sec. 67.403.

22. Final Sec. 67.401(i) permits a person to request that the Federal Air Surgeon review a decision to withdraw an Authorization or SODA. The request for a review must be made within 60 days of the service of the letter that withdrew the Authorization or SODA. The review procedures will be on an expedited basis and will provide the affected holder of an Authorization or SODA a full opportunity to respond to a withdrawal by submitting appropriate supporting evidence.

23. Final Sec. 67.403 differs from current Sec. 67.20 by providing for denial of an airman medical certificate if the application for an airman medical certificate is falsified. Though this consequence is implied, the current regulation specifically provides only for revocation or suspension of certificates. Additionally, Sec. 67.403 provides for denial or withdrawal of any Authorization or SODA if the information provided to obtain it is incorrect, either knowingly or unknowingly. Finally, Sec. 67.403(c) makes an unknowingly incorrect statement that the FAA relied upon in making its decisions regarding an application for an airman medical certificate or a request for an Authorization or SODA, a basis for denial, revocation, or suspension of an airman medical certificate and the denial or withdrawal of an Authorization or SODA.

24. A new Sec. 67.415 provides that the holder of any medical certificate that is suspended or revoked shall, upon the Administrator's request, return it to the Administrator. The FAA practice always has been to request return of the certificate in such circumstances to avoid any misunderstanding as to the validity of the certificate.

25. Where appropriate, changes are made to eliminate gender-specific pronouns, to replace "applicant" with "person," to use current position titles and addresses, to correct spelling and improve syntax, and to adjust section and paragraph references.